

Date Accepted _____

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR **2014** California e-file Return Authorization for Corporations FORM **8453-C**

Corporation name **PW TEC CORP** Identifying number **45-4241621**

Part I Tax Return Information (whole dollars only)
Table with 5 rows: 1 Total income (2,376), 2 Taxable income (2,376), 3 Total tax (800), 4 Tax due (0), 5 Overpayment (0)

Part II Settle Your Account Electronically for Taxable Year 2014
6 [] Direct deposit of refund
7 [] Electronic funds withdrawal 7a Amount 0. 7b Withdrawal date (mm/dd/yyyy)

Part III Schedule of Estimated Tax Payments for Taxable Year 2015
Table with 5 columns: First Payment, Second Payment, Third Payment, Fourth Payment
8 Amount: 800, 0, 0, 0
9 Withdrawal Date

Part IV Banking Information (Have you verified the corporation's banking information?)
10 Routing number
11 Account number 12 Type of account: [] Checking [] Savings

Part V Declaration of Officer
I authorize the corporate account be settled as designated in Part II. If I check Part II, Box 6, I declare that the account specified in Part IV for the direct deposit refund agrees with the authorization stated on my return.
Under penalties of perjury, I declare that I am an officer of the above corporation and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the corporation's 2014 California income tax return.

Sign Here
Signature of Officer _____ Date _____ Title _____

Part VI Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions.
I declare that I have reviewed the above corporation's return and that the entries on form FTB 8453-C are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the corporation's return.)

ERO Must Sign
ERO's signature _____ Date _____ Check if also paid preparer [X] Check if self-employed [] ERO's PTIN P00215833
Firm's name (or yours if self-employed) and address: NATALIE LEE, EA, 9067 LAS TUNAS DR., TEMPLE CITY CA, CA 91780-1901

Under penalties of perjury, I declare that I have examined the above corporation's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign
Paid preparer's signature _____ Date _____ Check if self-employed [] Paid preparer's PTIN P00215833
Firm's name (or yours if self-employed) and address: LA FIRST TAX & FINANCIAL SERVICE, 9067 LAS TUNAS DR., TEMPLE CITY CA, CA 91780-1901

Form **8879-S**

IRS e-file Signature Authorization for Form 1120S

OMB No. 1545-0123

▶ Do not send to the IRS. Keep for your records.

▶ Information about Form 8879-S and its instructions is at www.irs.gov/form8879s.

2014

Department of the Treasury
Internal Revenue Service

For calendar year 2014, or tax year beginning _____, 2014, and ending _____, 20____

Name of corporation
PW TEC CORP

Employer identification number
45-4241621

Part I Tax Return Information (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1120S, line 1c)	1	193,653
2	Gross profit (Form 1120S, line 3)	2	74,969
3	Ordinary business income (loss) (Form 1120S, line 21)	3	1,264
4	Net rental real estate income (loss) (Form 1120S, Schedule K, line 2)	4	0
5	Income (loss) reconciliation (Form 1120S, Schedule K, line 18)	5	1,264

Part II Declaration and Signature Authorization of Officer (Be sure to get a copy of the corporation's return)

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2014 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537** no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize LA FIRST TAX & FINANCIAL SERVICES to enter my PIN 41621 as my signature
ERO firm name do not enter all zeros
 on the corporation's 2014 electronically filed income tax return.

As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2014 electronically filed income tax return.

Officer's signature ▶ _____ Date ▶ _____ Title ▶ CEO

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 96469596469
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 3112**, IRS e-file Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ 2/19/2015

**ERO Must Retain This Form — See Instructions
 Do Not Submit This Form to the IRS Unless Requested To Do So**

U.S. Income Tax Return for an S Corporation

Department of the Treasury Internal Revenue Service

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.

2014

Information about Form 1120S and its separate instructions is at www.irs.gov/form1120s.

For calendar year 2014 or tax year beginning , ending

Header section containing: A S election effective date (1/13/2012), B Business activity code number (454110), C Check if Sch. M-3 attached, D Employer identification number (45-4241621), E Date incorporated (1/13/2012), F Total assets (\$47,320), Name (PW TEC CORP), Address (18351 COLIMA ROAD #155, ROWLAND HEIGHTS, CA 91748).

G Is the corporation electing to be an S corporation beginning with this tax year? (Yes/No)
H Check if: (1) Final return, (2) Name change, (3) Address change, (4) Amended return, (5) S election termination or revocation
I Enter the number of shareholders who were shareholders during any part of the tax year (1)

Caution. Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Main table with columns: Income (1a-6), Deductions (7-21), Tax and Payments (22a-27). Includes sub-tables for 1a/1b, 22a/22b, 23a/23b/23c.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here section with signature lines for officer and preparer, and a box for 'May the IRS discuss this return with the preparer shown below?' (checked Yes).

Paid Preparer Use Only section containing: Print/Type preparer's name (NATALIE LEE, EA), Preparer's signature (NATALIE LEE, EA), Date (2/19/2015), Firm's name (LA FIRST TAX & FINANCIAL SERVICES), Firm's address (9067 LAS TUNAS DR., TEMPLE CITY, CA), Firm's EIN (26-1703414), Phone no. ((626) 285 1221), ZIP code (91780-1901).

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	1,264
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss) 3a		
	b Expenses from other rental activities (attach statement) 3b		
	c Other net rental income (loss). Subtract line 3b from line 3a 3c		0
	4 Interest income 4		
	5 Dividends: a Ordinary dividends 5a		
	b Qualified dividends 5b		
	6 Royalties 6		
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S)) 7		
Income (Loss)	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S)) 8a		
	b Collectibles (28%) gain (loss) 8b		
	c Unrecaptured section 1250 gain (attach statement) 8c		
	9 Net section 1231 gain (loss) (attach Form 4797) 9		
	10 Other income (loss) (see instructions) Type ▶ 10		
Deductions	11 Section 179 deduction (attach Form 4562) 11		
	12a Charitable contributions 12a		
	b Investment interest expense 12b		
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶ 12c(2)		
d Other deductions (see instructions) Type ▶ 12d			
Credits	13a Low-income housing credit (section 42(j)(5)) 13a		
	b Low-income housing credit (other) 13b		
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) 13c		
	d Other rental real estate credits (see instructions) Type ▶ 13d		
	e Other rental credits (see instructions) Type ▶ 13e		
	f Biofuel producer credit (attach Form 6478) 13f		
	g Other credits (see instructions) Type ▶ 13g		
Foreign Transactions	14a Name of country or U.S. possession ▶ 14a		
	b Gross income from all sources 14b		
	c Gross income sourced at shareholder level 14c		
	Foreign gross income sourced at corporate level		
	d Passive category 14d		
	e General category 14e		
	f Other (attach statement) 14f		
	Deductions allocated and apportioned at shareholder level		
	g Interest expense 14g		
	h Other 14h		
	Deductions allocated and apportioned at corporate level to foreign source income		
	i Passive category 14i		
	j General category 14j		
	k Other (attach statement) 14k		
Other information			
l Total foreign taxes (check one): ▶ <input type="checkbox"/> Paid <input type="checkbox"/> Accrued 14l			
m Reduction in taxes available for credit (attach statement) 14m			
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment 15a		11
	b Adjusted gain or loss 15b		
	c Depletion (other than oil and gas) 15c		
	d Oil, gas, and geothermal properties—gross income 15d		
	e Oil, gas, and geothermal properties—deductions 15e		
	f Other AMT items (attach statement) 15f		
Items Affecting Shareholder Basis	16a Tax-exempt interest income 16a		
	b Other tax-exempt income 16b		
	c Nondeductible expenses 16c		12
	d Distributions (attach statement if required) (see instructions) 16d		
	e Repayment of loans from shareholders 16e		

Schedule K		Shareholders' Pro Rata Share Items (continued)	Total amount	
Other Information	17a	Investment income	17a	
	b	Investment expenses	17b	
	c	Dividend distributions paid from accumulated earnings and profits	17c	
	d	Other items and amounts (attach statement)		
Reconciliation	18	Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l . . .	18	1,264

Schedule L		Balance Sheets per Books		Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)		
Assets							
1	Cash		8,021				21,480
2a	Trade notes and accounts receivable						
b	Less allowance for bad debts		0				0
3	Inventories		38,497				22,040
4	U.S. government obligations						
5	Tax-exempt securities (see instructions)						
6	Other current assets (attach statement)						2,920
7	Loans to shareholders						
8	Mortgage and real estate loans						
9	Other investments (attach statement)						
10a	Buildings and other depreciable assets	1,547		2,639			
b	Less accumulated depreciation	809	738	1,759			880
11a	Depletable assets						
b	Less accumulated depletion		0				0
12	Land (net of any amortization)						
13a	Intangible assets (amortizable only)						
b	Less accumulated amortization		0				0
14	Other assets (attach statement)						
15	Total assets		47,256				47,320
Liabilities and Shareholders' Equity							
16	Accounts payable		14,707				
17	Mortgages, notes, bonds payable in less than 1 year						
18	Other current liabilities (attach statement)		16,215				9,233
19	Loans from shareholders		10,518				31,019
20	Mortgages, notes, bonds payable in 1 year or more						
21	Other liabilities (attach statement)						
22	Capital stock		5,100				5,100
23	Additional paid-in capital						
24	Retained earnings		716				1,968
25	Adjustments to shareholders' equity (attach statement)						
26	Less cost of treasury stock						
27	Total liabilities and shareholders' equity		47,256				47,320

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note. The corporation may be required to file Schedule M-3 (see instructions)

1	Net income (loss) per books	1,252	5	Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		a	Tax-exempt interest \$	0
3	Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14I (itemize):		6	Deductions included on Schedule K, lines 1 through 12 and 14I, not charged against book income this year (itemize):	
a	Depreciation \$		a	Depreciation \$	0
b	Travel and entertainment \$	12			
		12	7	Add lines 5 and 6	0
4	Add lines 1 through 3	1,264	8	Income (loss) (Schedule K, line 18). Line 4 less line 7	1,264

Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)

		(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1	Balance at beginning of tax year	482		
2	Ordinary income from page 1, line 21	1,264		
3	Other additions			
4	Loss from page 1, line 21			
5	Other reductions	12		
6	Combine lines 1 through 5	1,734	0	0
7	Distributions other than dividend distributions			
8	Balance at end of tax year. Subtract line 7 from line 6	1,734	0	0

K-1 Statement (Sch K-1, Form 1120S)

Line 15 - AMT Items

A Code A - Post-1986 depreciation adjustment A 11

Line 16 - Items affecting shareholder basis

C Code C - Nondeductible expenses C 12

Electronic Filing Information (1120/1120S/1120F)

Signature Method

Option (1) Using Practitioner PIN. Use Section (A) below.

Date return prepared

2/19/2015

Option (2) Scanned 8453

PIN Information (Enter information below)

(A) Practitioner PIN:			
	PIN (5 Digits)	TP entered	ERO entered
Taxpayer PIN:	41621	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ERO PIN:	96469		

If ERO entered taxpayer PIN, you must fill out the 8879-S (IRS e-file Signature Authorization Form).

EFIN

Enter your 6-digit EFIN number. You can enter EFINs in the Paid Preparer Table.

EFIN: 964695

Submission ID

The Submission ID for this e-File will be computed automatically when an EFIN is entered above. It will only be regenerated if a 'Rejected by EFC' or 'Rejected by Agency' acknowledgement is received and the e-File is recreated.

Submission ID: 9646952015019owzpz8i

Name Control

Click here to see Knowledge Base Document 14500, for more information on Name Controls

PWTE

Corporate Information

Name of corporation PW TEC CORP		Employer identification no. 45-4241621	
Street address 18351 COLIMA ROAD #155			
Address continuation		In care of name	
City ROWLAND HEIGHTS	State CA	ZIP code 91748	Daytime phone
Foreign country	Foreign province/county	Foreign postal code	Foreign phone number
Email address			
Officer first name MEILING	M.I. 	Officer last name CHEN	Title CEO
Date signed 2/20/2015			
Email address	Phone 626-560-5581	Foreign phone number	

ERO

(Enter data in the Preparer Manager)

ERO's name NATALIE LEE, EA	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN P00215833
Firm's name LA FIRST TAX & FINANCIAL SERVICES	ERO's EIN 26-1703414	
Address 9067 LAS TUNAS DR.		Phone (626) 285 1221
City TEMPLE CITY	State CA	ZIP code 91780-1901
Email address ePublic@gmail.com	Foreign phone number	

Paid Preparer

(Enter data in the Preparer Manager)

Paid preparer's name NATALIE LEE, EA	Non-paid prep type	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN P00215833
Firm's name LA FIRST TAX & FINANCIAL SERVICES	EIN 26-1703414		
Address 9067 LAS TUNAS DR.		Phone (626) 285 1221	
City TEMPLE CITY	State CA	ZIP code 91780-1901	Foreign country
Email address ePublic@gmail.com	Foreign phone number		

Cost of Goods Sold

(Rev. December 2012)

OMB No. 1545-2225

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.**
▶ **Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.**

Name PW TEC CORP	Employer identification number 45-4241621
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1	Inventory at beginning of year	1	38,497	
2	Purchases	2	82,069	
3	Cost of labor	3		
4	Additional section 263A costs (attach schedule)	4		
5	Other costs (attach schedule)	5	20,158	
6	Total. Add lines 1 through 5	6	140,724	
7	Inventory at end of year	7	22,040	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return (see instructions)	8	118,684	

9 a Check all methods used for valuing closing inventory:

- (i) Cost
- (ii) Lower of cost or market
- (iii) Other (Specify method used and attach explanation.) ▶ _____

b Check if there was a writedown of subnormal goods ▶

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶

d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d** _____

e If property is produced or acquired for resale, do the rules of section 263A apply to the entity (see instructions)? . . . Yes No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation Yes No

Line 5 (1125-A) - Other Costs for Cost of Goods Sold

1	Freight-in	1	8,597
2	Fulfilled Selling Fees - Amazon	2	11,561
3	Total other costs	3	20,158
4	Total other costs less expenses for offsetting credits	4	20,158

Depreciation and Amortization

(Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ **Attach to your tax return.**

▶ **Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.**

Attachment
Sequence No. **179**

Name(s) shown on return PW TEC CORP	Business or activity to which this form relates 1120S - RETAIL	Identifying number 45-4241621
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	500,000
2 Total cost of section 179 property placed in service (see instructions)	2	1,092
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	500,000
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	0
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	0
10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562.	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	0
13 Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12	13	0

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2014	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B - Assets Placed in Service During 2014 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System

20 a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	950
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	950
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost. Includes rows 25-29.

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table with 6 main columns: (a) Vehicle 1, (b) Vehicle 2, (c) Vehicle 3, (d) Vehicle 4, (e) Vehicle 5, (f) Vehicle 6. Includes rows 30-36.

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table with 2 columns: Yes, No. Includes rows 37-41.

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Includes rows 42-44.

Line 5 (1120S) - Other Income (Loss)

1 Section 481(a) adjustments due to a change in a method of accounting:		Amount	
	Description		
	Other Income		72
	Interest Income		1
	Total Section 481(a) adjustments	1	73
2	Total other income (loss)	2	73

Line 19 (1120S) - Other Deductions

1	Travel, Meals and Entertainment			
	b Meals and entertainment, subject to 50% limit	1b	24	
	c Meals and entertainment, subject to 80% limit (DOT)	1c		
	d Less disallowed	1d	12	
	e Subtract line d from lines b and c	1e		12
2	Automobile and truck expenses	2		2,516
3	Bank charges	3		150
4	Merchant Account Fee	4		5,892
5	Office expenses	5		336
6	Accounting Fee	6		2,980
7	Freight Out	7		15,018
8	Total other deductions	8		26,904

Line 6, Sch L (1120S) - Other Current Assets

		Beginning	End
1	Prepayment -		2,920
2	Total other current assets	0	2,920

Line 18, Sch L (1120S) - Other Current Liabilities

		Beginning	End
1	Credit Card Payable	5,609	4,089
2	Interest Payable		931
3	Accrued Salaries and Wages	8,533	2,741
4	Accrued Payroll Taxes	1,310	489
5	Sales Tax Payable	763	983
6	Total other current liabilities	16,215	9,233

Line 5 (1125-A) - Other Costs for Cost of Goods Sold

1	Freight-in	1	8,597
2	Fulfilled Selling Fees - Amazon	2	11,561
3	Total other costs	3	20,158
4	Total other costs less expenses for offsetting credits	4	20,158

Form 4562 Statement - 1120S

12/31/2014

Item No.	Description of Property	Date Placed In Service	Asset Code	Business Use %	Cost or Other Basis	Sec. 179 Deduction	Credit	Special Allowance	Salvage Value	Recovery Basis	Recovery Period	Method	Con-vention Code	Prior Accum. Deprec., 179, Bonus	2014 Deprec.	2014 Accum. Deprec.
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Listed Property

Listed property with more than 50% business use (Line 25 and 26)

1	COMPUTER	3/30/2012	F-4	100.00%	555	0	0	0	0	555	5	200DB	HY	289	106	395
2	COMPUTER	5/8/2012	F-4	100.00%	331	0	0	0	0	331	5	200DB	HY	172	63	235
3	COMPUTER	11/28/2013	F-4	100.00%	661	0	0	331	0	330	5	200DB	MQ4	348	126	474
4	COMPUTER	8/12/2014	F-4	100.00%	1,092	0	0	546	0	546	5	200DB	HY	0	109	655

Total listed prop with > 50% business use

2,639 0 0 877 0 1,762

809 404 1,759

Subtotal Listed Property

2,639 0 0 877 0 1,762

809 404 1,759

Total Depreciation and Amortization

2,639 0 0 877 0 1,762

809 404 1,759

Taxpayer's Record of Estimated Tax Payments (CA 100-ES)

	Payment due date	(a) Date paid	(b) Check or money order number or confirmation number	(c) Amount paid (do not include any credit card convenience fee)		(d) 2014 overpayment credit applied		(e) Total amount paid and credited (add (c) and (d))
				Franchise/Income	QSub	Franchise/Income	QSub	
1	4/15/2015			800	0	0	0	800
2	6/15/2015			0	0	0	0	0
3	9/15/2015			0	0	0	0	0
4	12/15/2015			0	0	0	0	0
Total				800	0	0	0	800
				Unused overpayment		0	0	

Form at bottom of page.

Installment 1 – File and Pay by the 15th day of the 4th month of the taxable year. When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

If no payment is due, do not mail this form.

WHERE TO FILE: Using black or blue ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number and "2015 Form 100-ES" on the check or money order. Detach form below. Enclose, but **do not** staple, payment with form and mail to:

**FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0531**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

ONLINE SERVICES: Corporations can make payments online with Web Pay for Businesses. After a one-time online registration, corporations can make an immediate payment or schedule payments up to a year in advance. Go to **ftb.ca.gov** for more information.

✂ DETACH HERE IF NO PAYMENT IS DUE OR PAID ELECTRONICALLY, DO NOT MAIL THIS FORM DETACH HERE ✂

Caution: You may be required to pay electronically. See instructions.

Installment 1

TAXABLE YEAR

CALIFORNIA FORM

2015 Corporation Estimated Tax

100-ES

3443903 PWTE 45-4241621 000000000000 15 FORM 1
TYB 01-01-2015 TYE 12-31-2015
PW TEC CORP

18351 COLIMA ROAD #155
ROWLAND HEIGHTS CA 91748

Est Tax Amt 800. QSub Tax Amt
Total Payment Amt 800.

2014

100S

RP

3443903 PWTE 45-4241621 000000000000 14
 TYB 01-01-2014 TYE 12-31-2014
 PW TEC CORP

18351 COLIMA ROAD 155
 ROWLAND HEIGHTS CA 91748

Schedule Q Questions (continued on Side 2)

A1 FINAL RETURN? ● Dissolved Surrendered (withdrawn) Merged/Reorganized IRC Section 338 sale QSub election

Enter date (mm/dd/yyyy) ●

A2 Is the S corporation deferring any income from the disposition of assets? ● Yes No

If "Yes" enter the year of disposition. (yyyy) ●

A3 Is the S corporation reporting previously deferred income from: ● Installment Sale ● IRC §1031 ● IRC §1033 ● Other

State Adjustments	1	Ordinary income (loss) from trade or business activities from Schedule F (Form 100S, Side 4), line 22 or federal Form 1120S, line 21. If Schedule F (Form 100S, Side 4) was not completed, attach federal Form 1120S, page 1, and supporting schedules	●	1	1,264	00
	2	Foreign or domestic tax based on income or profits and California franchise or income tax deducted ...	●	2	800	00
	3	Interest on government obligations	●	3	0	00
	4	Net capital gain from Schedule D (100S), Section A & Section B. Attach Schedule D (100S). See instructions	●	4	0	00
	5	Depreciation and amortization adjustments. Attach Schedule B (100S)	●	5	312	00
	6	Portfolio income	●	6	0	00
	7	Other additions. Attach schedule(s)	●	7	0	00
	8	Total. Add line 1 through line 7	●	8	2,376	00
	9	Dividends received deduction. Attach Schedule H (100S)	●	9	0	00
	10	Water's-edge dividend deduction. Attach Schedule H (100S)	●	10	0	00
	11	Contributions. See instructions	●	11	0	00
	12	Other deductions. Attach schedule(s)	●	12	0	00
	13	Total. Add line 9 through line 12	●	13	0	00
	14	Net income (loss) after state adjustments. Subtract line 13 from line 8	●	14	2,376	00

CA Net Income	15	Net income (loss) for state purposes. Use Schedule R if apportioning or allocating income	●	15	2,376	00
	16	R&TC Section 23802(e) deduction. See instructions	●	16	0	00
	17	Net operating loss deduction. See instructions	●	17	0	00
	18	Pierce's disease, EZ, LARZ, TTA, or LAMBRA NOL carryover deduction. See instructions	●	18	0	00
	19	Disaster loss carryover deduction. See instructions	●	19	0	00
	20	Net income for tax purposes. Combine line 16 through line 19. Subtract the result from line 15	●	20	2,376	00
Taxes	21	Tax. <u>1.5%</u> x line 20 (at least minimum franchise tax, if applicable). See instructions	●	21	800	00
	22	New employment credit, amount generated ● 22 <input type="text" value="0"/> <input type="text" value="00"/>				
	23	New employment credit, amount claimed	●	23	0	00
	24	a Credit name _____ code ● _____ amount ▶ 24a			0	00
		b Credit name _____ code ● _____ amount ▶ 24b			0	00
	25	To claim more than two credits, see instructions	●	25	0	00
	26	Add line 23 through line 25	●	26	0	00
	27	Balance. Subtract line 26 from line 21 (not less than minimum franchise tax plus QSub annual tax(es), if applicable)	●	27	800	00
	28	Tax from Schedule D (100S). Attach Schedule D (100S). See instructions	●	28	0	00
	29	Excess net passive income tax. See instructions	●	29	0	00
	30	Total tax. Add line 27 through line 29	●	30	800	00
Payments	31	Overpayment from prior year allowed as a credit	●	31	0	00
	32	2014 Estimated tax/QSub payments. See instructions	●	32	800	00
	33	2014 Withholding (Forms 592-B and/or 593). See instructions	●	33	0	00
	34	Amount paid with extension of time to file tax return	●	34	0	00
	35	Total payments. Add line 31 through line 34	●	35	800	00
Refund or Amount Due	36	Franchise or income tax due. If line 30 is more than line 35, subtract line 35 from line 30. Go to line 39	●	36	0	00
	37	Overpayment. If line 35 is more than line 30, subtract line 30 from line 35	●	37	0	00
	38	Amount of line 37 to be credited to 2015 estimated tax	●	38	0	00
	39	Use Tax. This is not a total line. See instructions ● 39 <input type="text" value="0"/> <input type="text" value="00"/>				
	40	Refund. If the sum of line 38 and line 39 is less than line 37, then subtract the result from line 37. See instructions to have the refund directly deposited.	●	40	0	00
		<input type="checkbox"/> Checking <input type="checkbox"/> Savings				
		40a. ● Routing number 40b. ● Type 40c. ● Account number				
	41	a Penalties and interest. b ● <input type="checkbox"/> Check if estimate penalty computed using Exception B or C. See instructions.	●	41a	0	00
	42	Total amount due. Add line 36, line 38, line 39, and line 41a, then subtract line 37 from the result	●	42	0	00

Schedule Q Questions (continued from Side 1)

- B** 1. During this taxable year, did another person or legal entity acquire control or majority ownership (more than a 50% interest) of this corporation or any of its subsidiaries that owned California real property (i.e., land, buildings), leased such property for a term of 35 years or more, or leased such property from a government agency for any term? ● Yes No
2. During this taxable year, did this corporation or any of its subsidiaries acquire control or majority ownership (more than a 50% interest) in another legal entity that owned California real property (i.e., land, buildings), leased such property for a term of 35 years or more, or leased such property from a government agency for any term? ● Yes No
3. During this taxable year, has more than 50% of the voting stock of this corporation cumulatively transferred in one or more transactions after an interest in California real property (i.e., land, buildings) was transferred to it that was excluded from property tax reassessment under Revenue and Taxation Code section 62(a)(2) and it was not reported on a previous year's tax return? ● Yes No
- (Yes requires filing of statement, penalties may apply— see instructions.)

Schedule Q Questions (continued on Side 3)

Schedule Q Questions (continued from Side 2)

- C** Principal business activity code. **Do not** leave blank ● 454110
 Business activity RETAIL Product or service PRODUCTS
- D** Is this S corporation filing on a water's-edge basis pursuant to R&TC Sections 25110 and 25113 for the current taxable year? ● Yes No
- E** Does this tax return include Qualified Subchapter S Subsidiaries? ● Yes No
- F** Date incorporated (mm/dd/yyyy) 01/13/2012 Where: ● State CA Country _____
- G** Maximum number of shareholders in the S corporation at any time during the year. **Do not** leave blank. ● 1
- H** Date business began in California or date income was first derived from California sources (mm/dd/yyyy) ● 01/13/2012
- I** Is the S corporation under audit by the IRS or has it been audited in a prior year? ● Yes No
- J** Effective date of federal S election (mm/dd/yyyy) ● 01/13/2012
- L** Accounting method ● (1) Cash (2) Accrual (3) Other
- M** Location of principal accounting records SEE ATTACHED WORKSHEET
- N** "Doing business as" (DBA) name. See instructions ● _____
- O** Have all required information returns (e.g., federal Form 1099, 8300 and state Forms 592, 592-B etc.) been filed with the Franchise Tax Board? N/A Yes No
- P** Is this S corporation apportioning or allocating income to California using Schedule R? ● Yes No
- Q** Has the S corporation included a reportable transaction or listed transaction within this return? See instructions for definitions. If "Yes," complete and attach federal Form 8886, for each transaction. ● Yes No
- R** Did this S corporation file the federal Schedule M-3 (Form 1120S)? ● Yes No
- S** Is form FTB 3544A, List of Assigned Credit Received and/or Claimed by an Assignee, attached to the return? ● Yes No

Schedule J Add-On Taxes and Recapture of Tax Credits. See instructions.

1	LIFO recapture due to S corporation election (IRC Section 1363(d) deferral \$ _____)	● 1		00
2	Interest computed under the look-back method for completed long-term contracts (attach form FTB 3834)	● 2		0 00
3	Interest on tax attributable to installment a) Sales of certain timeshares and residential lots	● 3a		00
		● 3b		00
4	IRC Section 197(f)(9)(B)(ii) election	● 4		00
5	Credit recapture name	● 5		0 00
6	Combine line 1 through line 5. Revise the amount on Side 2, line 36 or line 37, whichever applies, by this amount. Write "Schedule J" to the left of line 36 or line 37	● 6		0 00

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer ▶	Title	Date	● Telephone
Paid Preparer's Use Only	Officer's email address (optional)			
	Preparer's signature ▶ <u>NATALIE LEE, EA</u>	Date <u>02/19/2015</u>	Check if self-employed <input type="checkbox"/>	● PTIN <u>P00215833</u>
	Firm's name (or yours, if self-employed) and address ▶ <u>LA FIRST TAX & FINANCIAL SERVICES</u>			● FEIN <u>26-1703414</u>
	<u>9067 LAS TUNAS DR., TEMPLE CITY, CA 91</u>			● Telephone <u>(626) 285 1221</u>
May the FTB discuss this return with the preparer shown above? See instructions ● <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

Schedule F Computation of Trade or Business Income. See instructions.

		1c	
Income	1 a) Gross receipts or sales <u>196,545.</u> b) Less returns and allowances <u>2,892.</u> c) Balance <input type="radio"/>	1c	193,653 00
	2 Cost of goods sold from Schedule V, line 8 <input checked="" type="radio"/>	2	118,684 00
	3 Gross profit. Subtract line 2 from line 1c <input checked="" type="radio"/>	3	74,969 00
	4 Net gain (loss). Attach schedule <input checked="" type="radio"/>	4	0 00
	5 Other income (loss). Attach schedule <input checked="" type="radio"/>	5	73 00
	6 Total income (loss). Combine line 3 through line 5 <input checked="" type="radio"/>	6	75,042 00
Deductions	7 Compensation of officers. Attach schedule. See instructions <input checked="" type="radio"/>	7	0 00
	8 Salaries and wages <input checked="" type="radio"/>	8	36,000 00
	9 Repairs <input checked="" type="radio"/>	9	0 00
	10 Bad debts <input checked="" type="radio"/>	10	0 00
	11 Rents <input checked="" type="radio"/>	11	2,351 00
	12 Taxes <input checked="" type="radio"/>	12	6,629 00
	13 Interest <input checked="" type="radio"/>	13	944 00
	14 a) Depreciation <input checked="" type="radio"/> <u>950.</u> b) Less depreciation reported elsewhere <input checked="" type="radio"/> <u>0.</u> c) Balance <input checked="" type="radio"/>	14c	950 00
	15 Depletion <input checked="" type="radio"/>	15	0 00
	16 Advertising <input checked="" type="radio"/>	16	0 00
	17 Pension, profit-sharing plans, etc. <input checked="" type="radio"/>	17	0 00
	18 Employee benefit programs <input checked="" type="radio"/>	18	0 00
	19 a) Total travel and entertainment <input checked="" type="radio"/> <u>24.</u> b) Deductible amount <input checked="" type="radio"/>	19b	12 00
	20 Other deductions. Attach schedule <input checked="" type="radio"/>	20	26,892 00
	21 Total deductions. Add line 7 through line 20 <input checked="" type="radio"/>	21	73,778 00
	22 Ordinary income (loss) from trade or business. Subtract line 21 from line 6. Enter here and on Side 1, line 1. <input checked="" type="radio"/>	22	1,264 00

The corporation may not be required to complete Schedule L and Schedule M-1. See Schedule L and Schedule M-1 instructions for reporting requirements.

Schedule L Balance Sheet	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		8,021.	<input checked="" type="radio"/>	21,480.
2 a Trade notes and accounts receivable	0.		<input checked="" type="radio"/>	0.
b Less allowance for bad debts	(0.)	0.	(0.) <input checked="" type="radio"/>	0.
3 Inventories		38,497.	<input checked="" type="radio"/>	22,040.
4 Federal and state government obligations		0.	<input checked="" type="radio"/>	0.
5 Other current assets. Attach schedule(s)		0.	<input checked="" type="radio"/>	2,920.
6 Loans to shareholders. Attach schedule(s)	<input checked="" type="radio"/>	0.	<input checked="" type="radio"/>	0.
7 Mortgage and real estate loans		0.	<input checked="" type="radio"/>	0.
8 Other investments. Attach schedule(s)		0.	<input checked="" type="radio"/>	0.
9 a Buildings and other fixed depreciable assets	1,547.		2,639.	
b Less accumulated depreciation	(809.)	<input checked="" type="radio"/> 738.	(1,759.)	<input checked="" type="radio"/> 880.
10 a Depletable assets	0.		0.	
b Less accumulated depletion	(0.)	0.	(0.)	0.
11 Land (net of any amortization)	<input checked="" type="radio"/>	0.	<input checked="" type="radio"/>	0.
12 a Intangible assets (amortizable only)	0.		<input checked="" type="radio"/>	0.
b Less accumulated amortization	(0.)	0.	(0.)	0.
13 Other assets. Attach schedule(s)	<input checked="" type="radio"/>	0.	<input checked="" type="radio"/>	0.
14 Total assets.	<input checked="" type="radio"/>	47,256.	<input checked="" type="radio"/>	47,320.
Liabilities and shareholders' equity				
15 Accounts payable		14,707.	<input checked="" type="radio"/>	0.
16 Mortgages, notes, bonds payable in less than 1 year		0.	<input checked="" type="radio"/>	0.
17 Other current liabilities. Attach schedule(s)		16,215.	<input checked="" type="radio"/>	9,233.
18 Loans from shareholders. Attach schedule(s)	<input checked="" type="radio"/>	10,518.	<input checked="" type="radio"/>	31,019.
19 Mortgages, notes, bonds payable in 1 year or more	<input checked="" type="radio"/>	0.	<input checked="" type="radio"/>	0.
20 Other liabilities. Attach schedule(s)	<input checked="" type="radio"/>	0.	<input checked="" type="radio"/>	0.
21 Capital stock	<input checked="" type="radio"/>	5,100.	<input checked="" type="radio"/>	5,100.
22 Paid-in or capital surplus	<input checked="" type="radio"/>	0.	<input checked="" type="radio"/>	0.
23 Retained earnings	<input checked="" type="radio"/>	716.	<input checked="" type="radio"/>	1,968.
24 Adjustments. Attach schedule(s)	<input checked="" type="radio"/>	0.	<input checked="" type="radio"/>	0.
25 Less cost of treasury stock	<input checked="" type="radio"/>	(0.)	<input checked="" type="radio"/>	(0.)
26 Total liabilities and shareholders' equity	<input checked="" type="radio"/>	47,256.	<input checked="" type="radio"/>	47,320.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return.

If the S corporation completed federal Schedule M-3 (Form 1120S). See instructions.

<p>1 Net income per books 1,252.</p> <p>2 Income included on Schedule K, line 1 through line 10b, not recorded on books this year (itemize) _____ 0. ●</p> <hr/> <p>3 Expenses recorded on books this year not included on Schedule K, line 1 through line 12e (itemize)</p> <p>a Depreciation \$ 312.</p> <p>b State taxes \$ 800.</p> <p>c Travel and entertainment \$ 12.</p> <p>d Other \$ 0.</p> <p>e Total. Add line 3a through line 3d ● 1,124.</p> <p>4 Total. Add line 1 through line 3e 2,376.</p>	<p>5 Income recorded on books this year not included on Schedule K, line 1 through line 10b (itemize)</p> <p>a Tax-exempt interest \$ _____ 0.</p> <p>b Other \$ _____ 0.</p> <p>c Total. Add line 5a and line 5b ● 0.</p> <p>6 Deductions included on Schedule K, line 1 through line 12e, not charged against book income this year (itemize)</p> <p>a Depreciation \$ _____ 0.</p> <p>b State tax refunds \$ _____ 0.</p> <p>c Other \$ _____ 0.</p> <p>d Total. Add line 6a through line 6c ● 0.</p> <p>7 Total. Add line 5c and line 6d 0.</p> <p>8 Income (loss) (Schedule K, line 19, col. d). Line 4 less line 7 ● 2,376.</p>	
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Schedule M-2 CA Accumulated Adjustments Account, Other Adjustments Account, and Other Retained Earnings. See instructions.

Important: Use California figures and federal procedures.

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Other retained earnings (see instructions)
1 Balance at beginning of year	● 482.	0.	⊙ 0.
2 Ordinary income from Form 100S, Side 1, line 1	1,264.		
3 Other additions	⊙ 0.	0.	
4 Loss from Form 100S, Side 1, line 1	(0.)		
5 Other reductions	⊙ (12.)	(0.)	(0.)
6 Combine line 1 through line 5	1,734.	0.	0.
7 Distributions other than dividend distributions	● 0.	0.	0.
8 Balance at end of year. Subtract line 7 from line 6	● 1,734.	0.	0.
9 Retained earnings at end of year. Add line 8, column (a) through column (c) ●			1,734.
● <input type="checkbox"/> If the corp. has C corp. E&P at the end of the taxable year, check the box and enter the amount. See instructions . . . ●			0.

Schedule V Cost of Goods Sold

1 Inventory at beginning of year	⊙	1	38,497	00
2 Purchases	●	2	82,069	00
3 Cost of labor	●	3	0	00
4 Other IRC Section 263A costs. Attach schedule	●	4	0	00
5 Other costs. Attach schedule	⊙	5	20,158	00
6 Total. Add line 1 through line 5		6	140,724	00
7 Inventory at end of year	⊙	7	22,040	00
8 Cost of goods sold. Subtract line 7 from line 6	●	8	118,684	00

Was there any change in determining quantities, costs, or valuations between opening and closing inventory? Yes No

If "Yes," attach an explanation. Enter California seller's permit number, if any LOWER OF COST OR MARKET

Check if the LIFO inventory method was adopted this taxable year for any goods. If checked, attach federal Form 970 ●

If the LIFO inventory method was used for this taxable year, enter the amount of closing inventory computed under LIFO . . . ● 0

Schedule K S Corporation Shareholder's Shares of Income, Deductions, Credits, etc.

	(a) Pro-rata share items		(b) Amount from federal K (1120S)	(c) California adjustment	(d) Total amounts using California law
Income (Loss)	1 Ordinary business income (loss)	1	1,264.	800.	2,064.
	2 Net rental real estate income (loss). Attach federal Form 8825 . . .	2	0.		0.
	3 a Other gross rental income (loss)	3a	0.		0.
	b Expenses from other rental activities. Attach schedule	3b	0.		0.
	c Other net rental income (loss). Subtract line 3b from line 3a . . .	3c	0.	0.	0.
	4 Interest income	4	0.	0.	0.
	5 Dividends. See instructions	5	0.		0.
	6 Royalties	6	0.		0.
	7 Net short-term capital gain (loss). Attach Schedule D (100S)	7	0.	0.	0.
8 Net long-term capital gain (loss). Attach Schedule D (100S)	8	0.	0.	0.	
9 Net Section 1231 gain (loss)	9	0.	0.	0.	
Other Income (Loss)	10 a Other portfolio income (loss). Attach schedule	10a	0.		0.
	b Other income (loss). Attach schedule	10b	0.	0.	0.
Deductions	11 Expense deduction for recovery property (IRC Section 179) Attach Schedule B (100S)	11	0.	0.	0.
	12 a Charitable contributions	12a	0.		0.
	b Investment interest expense	12b	0.		0.
	c 1 Section 59(e)(2) expenditures	12c1	0.		0.
	2 Type of expenditures _____	12c2			
	d Deductions-portfolio. Attach schedule	12d	0.		0.
e Other deductions. Attach schedule	12e	0.		0.	
Credits	13 a Low-income housing credit. See instructions	13a			0.
	b Credits related to rental real estate activities. Attach schedule.	13b			0.
	c Credits related to other rental activities. See instructions. Attach schedule . .	13c			0.
	d Other credits. Attach schedule	13d			0.
	e New employment credit	13e			
14 Total withholding allocated to all shareholders	14				
Alternative Minimum Tax (AMT) Items	15 a Depreciation adjustment on property placed in service after 12/31/86	15a			11.
	b Adjusted gain or loss. See instructions	15b			0.
	c Depletion (other than oil and gas)	15c			0.
	d 1 Gross income from oil, gas, and geothermal properties	15d1			0.
	2 Deductions allocable to oil, gas, and geothermal properties.	15d2			0.
e Other AMT items	15e			0.	
Items affecting Shareholder Basis	16 a Tax-exempt interest income	16a	0.		0.
	b Other tax-exempt income	16b	0.		0.
	c Nondeductible expenses	16c	12.		12.
	d Total property distributions (including cash) other than dividends distribution reported on line 17c	16d	0.		0.
Other Information	17 a Investment income. See instructions	17a	0.	0.	0.
	b Investment expenses. See instructions	17b	0.		0.
	c Total dividend distributions paid from accumulated earnings and profits . .	17c	0.		0.
	d Other items and amounts not included in lines 1 - 17b and lines 18a-e that are required to be reported separately to shareholders. Attach schedule . . .	17d	0.		0.
Other State Taxes	18 a Type of income _____	18a			
	b Name of state _____	18b			
	c Total gross income from sources outside California. Attach schedule	18c			0.
	d Total applicable deductions and losses. Attach schedule	18d			0.
	e Total other state taxes. Check one: <input type="checkbox"/> Paid <input type="checkbox"/> Accrued . .	18e			
Recon- ciliation	19 Income (loss) (required only if Schedule M-1 must be completed). Combine line 1, line 2, and line 3c through line 10b. From the result, subtract the sum of lines 11, 12a, 12b, 12c1, 12d and 12e	19	1,264.	800.	2,064.

S Corporation Depreciation and Amortization

B (100S)

For use by S corporations only. Attach to Form 100S.

Corporation name PW TEC CORP	California corporation number 3443903
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Part I Depreciation. Use additional sheets if necessary.

1 Enter federal depreciation from federal Form 4562, line 22. IRC Section 179 expense deduction is not included on this line. Get federal Form 4562 instructions	1	950	00
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California depreciation:

(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Method of figuring dep.	(f) Life or rate	(g) Depreciation for this year		
2 COMPUTER	03/30/2012	555.	289.	200DB	5	106.		
COMPUTER	05/08/2012	331.	172.	200DB	5	63.		
COMPUTER	11/28/2013	661.	33.	200DB	5	251.		
COMPUTER	08/12/2014	1,092.	0.	200DB	5	218.		
		0.	0.			0.		
3 Add the amounts on line 2, column (g)						3	638	00
4 Subtract line 3 from line 1. If negative, use brackets. Enter here and on the applicable line of Form 100S, Side 6, Schedule K						4	312	00
5 Enter IRC Section 179 expense deduction here and on Form 100S, Side 1, line 12. Do not enter more than \$25,000						5	0	00

Part II Amortization. Use additional sheets if necessary.

1 Enter federal amortization from federal Form 4562, line 44	1	0	00
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California amortization:

(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (See instructions)	(f) Period or percentage	(g) Amortization for this year		
2		0.	0.			0.		
		0.	0.			0.		
		0.	0.			0.		
		0.	0.			0.		
3 Add the amounts on line 2, column (g)						3	0	00
4 California amortization adjustment. Subtract line 3 from line 1. If negative, use brackets. Enter here and on the applicable line of Form 100S, Side 6, Schedule K						4	0	00

Part III Depreciation and Amortization Adjustment

1 Combine the amounts on Part I, line 4, and Part II, line 4. Enter here (if negative, use brackets) and on Form 100S, Side 1, line 5. For passive activities, see instructions	1	312	00
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2014 S Corporation Tax Credits

C (100S)

(a) Credit amount limited to 1/3 of total	(b) Carryover from prior year	(c) Credit used this year, not more than (a) + (b)	(d) Tax balance that may be offset by credits	(e) Credit carryover to 2015
1 Regular tax from Form 100S, Side 2, line 21			800.	
2 Minimum franchise tax plus QSub annual tax(es), if applicable			800.	
3 Subtract line 2 from line 1. If zero or less, enter -0				
Note: Reduce the amount in column (d) by the New Employment Credit amount claimed on Form 100S, line 23, if applicable.			0.	
4 Code: _____ Credit name: _____	0.	0.	0.	0.
5 Code: _____ Credit name: _____	0.	0.	0.	0.
6 Code: _____ Credit name: _____	0.	0.	0.	0.
7 Code: _____ Credit name: _____	0.	0.	0.	0.
8 Code: _____ Credit name: _____	0.	0.	0.	0.
9 Code: _____ Credit name: _____	0.	0.	0.	0.
10 Code: _____ Credit name: _____	0.	0.	0.	0.

• Enter the credit amounts on Form 100S, Side 2, line 24a, and line 24b. If more than two credits, enter the total of any remaining credits on Form 100S, Side 2, line 25.

Shareholder's Share of Income, Deductions, Credits, etc.

K-1 (100S)

#1

TYB 01-01-2014 TYE 12-31-2014
609-37-6663
TAWEI JIAO

18480 AGUIRO ST
ROWLAND HEIGHTS CA 91748

3443903 45-4241621
PW TEC CORP

18351 COLIMA ROAD 155
ROWLAND HEIGHTS CA 91748

- A** Shareholder's percentage of stock ownership at year end %
- B** Reportable transaction or tax shelter registration number(s):
- C** Check here if this is: (1) A final Schedule K-1 (2) An amended Schedule K-1
- D** What type of entity is this shareholder? (1) Individual (2) Estate/Trust (3) Qualified Exempt Organization (4) Single Member LLC
- E** Is this shareholder a resident of California? Yes No

Caution: Refer to the shareholder's instructions for Schedule K-1 (100S) before entering information from this schedule on your California tax return.

	(a) Pro-rata share items	(b) Amount from federal Schedule K-1 (1120S)	(c) California adjustment	(d) Total amounts using California law Combine (b) and (c) where applicable	(e) California source amounts and credits
Income (Loss)	1 Ordinary business income (loss)	1,264.	800.	<input checked="" type="radio"/> 2,064.	<input type="checkbox"/> 0.
	2 Net rental real estate income (loss)	0.	0.	<input checked="" type="radio"/> 0.	<input type="checkbox"/> 0.
	3 Other net rental income (loss)	0.	0.	<input checked="" type="radio"/> 0.	<input checked="" type="radio"/> 0.
	4 Interest income	0.	0.	<input checked="" type="radio"/> 0.	<input type="checkbox"/> 0.
	5 Dividends. See instructions	0.	0.	<input checked="" type="radio"/> 0.	<input type="checkbox"/> 0.
	6 Royalties	0.	0.	<input checked="" type="radio"/> 0.	<input type="checkbox"/> 0.
	7 Net short-term capital gain (loss)	0.	0.	<input checked="" type="radio"/> 0.	<input type="checkbox"/> 0.
	8 Net long-term capital gain (loss)	0.	0.	<input checked="" type="radio"/> 0.	<input type="checkbox"/> 0.
	9 Net Section 1231 gain (loss)	0.	0.	<input checked="" type="radio"/> 0.	<input type="checkbox"/> 0.
Other Income (Loss)	10 a Other portfolio income (loss). Attach schedule. . .	0.	0.	<input checked="" type="radio"/> 0.	<input type="checkbox"/> 0.
	b Other income (loss)	0.	0.	<input checked="" type="radio"/> 0.	<input type="checkbox"/> 0.

Caution: Refer to the shareholder's instructions for Schedule K-1 (100S) before entering information from this schedule on your California tax return.

	(a) Pro-rata share items	(b) Amount from federal Schedule K-1 (1120S)	(c) California adjustment	(d) Total amounts using California law Combine (b) and (c) where applicable	(e) California source amounts and credits
Deductions	11 Expense deduction for recovery property (IRC Section 179) Attach schedules	0.	0.	0.	0.
	12 a Charitable contributions	0.	0.	0.	
	b Investment interest expense	0.	0.	0.	0.
	c 1 Section 59(e)(2) expenditures	0.	0.	0.	0.
	2 Type of expenditures				
	d Deductions-portfolio	0.	0.	0.	0.
e Other deductions	0.	0.	0.	0.	
Credits	13 a Low-income housing credit. See instructions. Attach schedule			0.	0.
	b Credits related to rental real estate activities other than on line 13(a). Attach schedule			0.	0.
	c Credits related to other rental activities. See instructions. Attach schedule			0.	0.
	d Other credits. Attach schedule			0.	0.
	e New employment credit			0.	0.
	14 Total withholding (equals amount on Form 592-B if calendar year)			0.	0.
Alternative Minimum Tax (AMT) Items	15 a Depreciation adjustment on property placed in service after 12/31/86.			11.	0.
	b Adjusted gain or loss			0.	0.
	c Depletion (other than oil and gas).			0.	0.
	d 1 Gross income from oil, gas, and geothermal properties			0.	0.
	2 Deductions allocable to oil, gas, and geothermal properties			0.	0.
	e Other AMT items. Attach schedule			0.	0.
Items Affecting Shareholder Basis	16 a Tax-exempt interest income	0.	0.	0.	0.
	b Other tax-exempt income	0.	0.	0.	0.
	c Nondeductible expenses	12.	0.	12.	0.
	d Total property distributions (including cash) other than dividends distribution reported on line 17c	0.	0.	0.	0.
	e Repayment of loans from shareholders	0.		0.	0.
Other Information	17 a Investment income. See instructions	0.	0.	0.	0.
	b Investment expenses. See instructions.	0.	0.	0.	0.
	c Total taxable dividend distribution paid from accumulated earnings and profits. See instructions	0.	0.	0.	0.
	d Other information. See instructions	0.		0.	
Other State Taxes	18 a Type of income				
	b Name of state				
	c Total gross income from sources outside California. Attach schedule			0.	0.
	d Total applicable deductions and losses. Attach schedule			0.	0.
	e Total other state taxes. Check one: <input type="checkbox"/> Paid <input type="checkbox"/> Accrued			0.	0.

Table 1 — Each shareholder's share of nonbusiness income from intangibles. See instructions.

Interest \$ 0. Royalties \$ 0. Dividends \$ 0.
 1231 Gains/Losses \$ 0. Capital Gains/Losses \$ 0. Other \$ 0.

FOR USE BY SHAREHOLDERS ONLY. SEE INSTRUCTIONS.

Table 2 — Shareholder's pro-rata share of business income and factors — See instructions.

- A. Shareholder's share of the S corporation's business income \$ 0.
- B. Shareholder's share of the nonbusiness income from real and tangible property sourced or allocable to California:
 Capital Gains/Losses \$ 0. Rents/Royalties \$ 0.
 1231 Gains/Losses \$ 0. Other \$ 0.
- C. Shareholder's share of the S corporation's property, payroll, and sales:

Factors	Total within and outside California	Total within California
Property: Beginning	\$ 0.	\$ 0.
Ending	\$ 0.	\$ 0.
Annual Rent Expense	\$ 0.	\$ 0.
Payroll	\$ 0.	\$ 0.
Sales	\$ 0.	\$ 0.

Other Shareholder Information

Net Operating Loss (NOL) Computation and NOL and Disaster Loss Limitations — Corporations

2014

3805Q

Attach to Form 100, Form 100W, Form 100S, or Form 109.

Corporation name PW TEC CORP	California corporation number 3443903
During the taxable year the corporation incurred the NOL, the corporation was a(n): <input checked="" type="radio"/> <input type="checkbox"/> C corporation	FEIN 45-4241621
<input checked="" type="radio"/> <input type="checkbox"/> S corporation <input checked="" type="radio"/> <input type="checkbox"/> Exempt organization <input checked="" type="radio"/> <input type="checkbox"/> Limited Liability Company (electing to be taxed as a corporation)	

If the corporation previously filed California tax returns under another corporate name, enter the corporation name and California corporation number:

If the corporation is included in a combined report of a unitary group, see instructions, General Information C, Combined Reporting.

Part I Current year NOL. If the corporation does not have a current year NOL, go to Part II.

1 Net loss from Form 100, line 18; Form 100W, line 18; Form 100S, line 15; or Form 109, line 2. Enter as a positive number	1		0 00
2 2014 disaster loss included in line 1. Enter as a positive number	2		00
3 Subtract line 2 from line 1. If zero or less, enter -0- and see instructions	3		0 00
4 a Enter the amount of the loss incurred by a new business included in line 3	4a	00	
b Enter the amount of the loss incurred by an eligible small business included in line 3	4b	00	
c Add line 4a and line 4b	4c		0 00
5 General NOL. Subtract line 4c from line 3	5		0 00
6 Current year NOL. Add line 2, line 4c, and line 5. See instructions	<input checked="" type="radio"/> 6		0 00

If the corporation is using the current year NOL to carryback to offset net income for taxable years 2012 and/or 2013, complete Part III, NOL carryback, on Side 2 **before** completing Part I, lines 7 - 9 below.

7 2014 NOL carryback used to offset 2012 net income. Enter the amount from Part III, line 3, column (f)	<input checked="" type="radio"/> 7		0 00
8 2014 NOL carryback used to offset 2013 net income. Enter the amount from Part III, line 3, column (h)	<input checked="" type="radio"/> 8		0 00
9 2014 NOL carryover to 2015. Add line 7 and line 8, then subtract the result from line 6. See instructions	<input checked="" type="radio"/> 9		0 00

Election to waive carryback

Check the box if the corporation elects to relinquish the entire carryback period with respect to 2014 NOL under IRC Section 172(b)(3). By making the election, the corporation is electing to carry an NOL forward instead of carrying it back in the previous two years. Once the election is made, it's **irrevocable**. See instructions.

Continue with Part II, NOL carryover and disaster loss carryover limitations. **Do not** complete Part III, NOL carryback.

Part II NOL carryover and disaster loss carryover limitations. See instructions.

1 Net income (loss) – Enter the amount from Form 100, line 18; Form 100W, line 18; Form 100S, line 15 less line 16 (but not less than -0-); or Form 109, line 2.	<input checked="" type="radio"/>		2,376.
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Prior Year NOLs

(a) Year of loss	(b) Code – See instructions	(c) Type of NOL – See below *	(d) Initial loss	(e) Carryover from 2013	(f) Amount used in 2014		(h) Carryover to 2015 col. (e) - col. (f)
2 <input checked="" type="radio"/>			0.	<input checked="" type="radio"/> 0.	0.	0.	<input checked="" type="radio"/> 0.
<input checked="" type="radio"/>			0.	<input checked="" type="radio"/> 0.	0.	0.	<input checked="" type="radio"/> 0.
<input checked="" type="radio"/>			0.	<input checked="" type="radio"/> 0.	0.	0.	<input checked="" type="radio"/> 0.
<input checked="" type="radio"/>			0.	<input checked="" type="radio"/> 0.	0.	0.	<input checked="" type="radio"/> 0.

Current Year NOLs

3	Year	(c) Type of NOL	(d) Initial loss	(e) Carryover from 2013	(f) Amount used in 2014		(h) col. (d) - col. (f) See instructions.
	2014	DIS	0.		0.		0.
	2014						0.
	2014						0.
	2014						0.
	2014						0.

* **Type of NOL:** General (GEN), New Business (NB), Eligible Small Business (ESB), or Disaster (DIS).

Part III NOL carryback

1 2012 Net income – Enter the amount from 2012 Form 100, line 23; Form 100W, line 23; Form 100S, line 21 (but not less than -0-); or taxable income from Form 109, line 9	
2 2013 Net income – Enter the amount from 2013 Form 100, line 23; Form 100W, line 23; Form 100S, line 21 (but not less than -0-); or taxable income from Form 109, line 9	

(a) Year of loss	(b) Code – See instructions	(c) Type of NOL – See below*	(d) Initial loss	(e) Carryback limitations 75% of col. (d)	2012		2013		(j) Carryover to 2015 col. (d) minus [col. (f) plus col. (h)]
					(f) Carryback used – See instructions	(g) After carryback col. (e) minus col. (f)	(h) Carryback used – See instructions	(i) After carryback col. (g) minus col. (h)	
3 2014				0.		0.		0.	0.
2014				0.		0.		0.	0.
2014				0.		0.		0.	0.
2014				0.		0.		0.	0.
2014				0.		0.		0.	0.

*Type of NOL: General (GEN), New Business (NB), Eligible Small Business (ESB), or NOL attributable to a qualified disaster loss (DIS).

Part IV 2014 NOL deduction

1 Total the amounts in Part II, line 2, column (f)	<input checked="" type="radio"/>	1	0	00
2 Enter the total amount from line 1 that represents disaster loss carryover deduction here and on Form 100, line 21; Form 100W, line 21; or Form 100S, line 19. Form 109 filers enter -0-	<input type="radio"/>	2	0	00
3 Subtract line 2 from line 1. Enter the result here and on Form 100, line 19; Form 100W, line 19; Form 100S, line 17; or Form 109, line 7	<input checked="" type="radio"/>	3	0	00

CA Business Electronic Filing Information

Signature

CA 8453-C must be signed and either be retained by the ERO for a minimum of 3 years or be scanned and attached to this return using the E-File menu, 'Attach PDF'.

Date return prepared 2/19/2015

EFIN

Enter your 6-digit EFIN number. You can enter EFINs in the Paid Preparer Table.

EFIN: 964695

Submission ID

The state of CA rejects e-files if the efile is not transmitted within 5 days of creating the efile. Because of this limitation, the program will create a new SubmissionID below each time the e-file is created. Please transmit within 5 days.

Submission ID: _____

Name Control

(See instructions on the 'Name Control' tab)

PWTE _____

Taxpayer Information

Name PW TEC CORP			EIN 45-4241621	
Street 18351 COLIMA ROAD #155			CA corp number 3443903	
In care of name		Type of corporation		SOS number
City ROWLAND HEIGHTS		State CA	Zip code 91748	Daytime phone number
Foreign country		Foreign province/county		Foreign postal code
Foreign phone				
Email address				
Officer name MEILING CHEN		Title CEO	Phone number 626-560-5581	Date signed 2/20/2015
Email address			Foreign phone number	Authorize third party Check ("X") here: <input type="checkbox"/>

ERO (Enter data in the Preparer Manager)

ERO's name NATALIE LEE, EA			Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN P00215833
Firm's name LA FIRST TAX & FINANCIAL SERVICES			ERO's EIN 26-1703414	
Address 9067 LAS TUNAS DR.			Phone (626) 285 1221	
City TEMPLE CITY		State CA	ZIP code 91780-1901	Foreign country
Email address ePublic@gmail.com			Foreign phone	

Paid Preparer (Enter data in the Preparer Manager)

Paid preparer's name NATALIE LEE, EA			Non-paid prep type	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN P00215833
Firm's name LA FIRST TAX & FINANCIAL SERVICES			EIN 26-1703414		
Address 9067 LAS TUNAS DR.			Phone (626) 285 1221		
City TEMPLE CITY		State CA	ZIP code 91780-1901	Foreign country	
Email address ePublic@gmail.com			Foreign phone		

Line 5, Sch F (CA 100S) - Other Income

1 Section 481(a) adjustments due to a change in a method of accounting:		Amount	
Description			
	Other Income	72	
	Interest Income	1	
	Total Section 481(a) adjustments	1	73
2	Total other income	2	73

Line 20, Sch F (CA 100S) - Other Deductions

1	Automobile and truck expenses	1	2,516
2	Bank charges	2	150
3	Merchant Account Fee	3	5,892
4	Office expenses	4	336
5	Accounting Fee	5	2,980
6	Freight Out	6	15,018
7	Total other deductions	7	26,892

Line 5, Sch L (CA 100S) - Other Current Assets

		Beginning	End
1	Prepayment -	0	2,920
2	Total other current assets	0	2,920

Line 17, Sch L (CA 100S) - Other Current Liabilities

		Beginning	End
1	Credit Card Payable	5,609	4,089
2	Interest Payable	0	931
3	Accrued Salaries and Wages	8,533	2,741
4	Accrued Payroll Taxes	1,310	489
5	Sales Tax Payable	763	983
6	Total other current liabilities	16,215	9,233

